Res.: Yes or No Est. Repairs: days 3 Val.: Yes or No Lum Sum: CA / REV / REP. / 24 HRS

Vehicle: IN / OUT Person Contacted: Date:

Action / Instruction

Date / Time

T/Radio: Insured / Std / NI / NA FEB21EA10094 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / mm D.O.A. D.O.I. Survey held at Des. of Damages : Frt / Rear / O/\$ / N/\$ / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

c.c 2988

MY: PV: Nett:

Date/Time, File Pass to? : Preli. Report : Final Report Date/Time. File Return to?

Days Of Repair:

Resurvey No. of Trip:

Survey Fee: Transportation: \_S + RS,\_\_\_\$I

Add Fee:

: Site Insp (\$ Interview (\$

Photos Others

Report Format: Lunip Sum / I.B.J: (3)

Weel end 48

Tech. Invs (3)

TOTAL

SS1Y21160008-01 / SME MOTOR PTE LTD ENTRY DATE & TIME: 06/01/2021 17:27 (SGT) SUBMITTED BY: Wen Ying VERSION: 2 (12/01/2021 11:26 (SGT))



# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

5. Any false reporting may be referred to the Police for investigation.

- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

## **ACCIDENT STATEMENT**

Date of Submission
Date of Accident
Exact Leasting of Acc

Exact Location of Accident Additional Location Information

Country/State of Loss

06/01/2021 17:27 (SGT) 05/01/2021 05:00 (SGT) 539 Bedok North Rd, Singapore OSCP BLK 539 BEDOK NTH ST 3.

Singapore

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

YN8028Z

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address

Mobile Phone No

Alternative Phone No

No

KOH CHEUN MENG

SXXXX857D

guankeebeancurd@gmail.com

(Phone) +65-98158512

+65-98158512

## VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category Mitsubishi

Canter

Employment

No - Claiming third party Commercial vehicle

## INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number Cover Note Number AIG

Comprehensive

No

1900099296

-

#### DRIVER

Name of Driver Passport No/FIN Date Of Birth

Occupation

PANCHAVARNAM KUMAR GXXXX296X 14/02/1992 Outdoor

Accident report SS1Y21160008

Date Of Driving Pass
Driving experience

Gender

Mobile Number Alt. Phone Number

Alt. Phone Number Email Address Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

Vehicle Registration Number of Other Vehicle Owned by Driver

Insurance Company of Other Vehicle Owned by Driver

04/12/2018

2 YEARS AND 1 MONTH

Male

(Phone) +65-91976154

guankeebeancurd@gmail.com

BLK 472 ANG MO KIO AVE 10 #09-860

560472

No

Employee

No

5

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface Collision - Head to Rear

Clear

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?

No
Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged?

Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?

Was notice of intended Prosecution given?

No
If yes, against whom?

#### CIRCUMSTANCES OF ACCIDENT

I WAS STOPPED AND STATIONARY AT BEHIND VEHICLE B WAITING AT THE GANTRY ENTRANCE TO OSCP BLK 539 BEDOK NTH ST 3. SUDDENLY VEHICLE B REVERSED AND COLLIDED ONTO MY FRONT PORTION OF MY VEHICLE AND CAUSED DAMAGES.

## ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

 Vehicle Registration Number
 GX5451P

 Vehicle Manufacturer

 Vehicle Model

 Vehicle Variant

 Vehicle Colour

 Vehicle Category
 Commercial vehicle

 Name of Driver

 Contact Number

 Address

 Address complement

Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process
- This Form must be completed by the Policyholder and/or the Authorised Driver
- information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "insurers"), the insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s)
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mall packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.

I authorized SME to email the GIA Report to admin Enhamotor. com/ yuntil nhtmotor.com

SKETCH PLAN

	A: YN 8028Z
05CP BIK539	B. GX5451P
	OSCP BIK 539
(B) Sarring	Bedok North
A	Street 3

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was stopped and stationary at behind Veh "B", waitting at the gantry entrance to OSCP BIK539 Bedok North street 3.
Suddenly Veh "B" teversed and collided onto my front portion of my Vehicle and caused clamages.
P. Kurit.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Date & Time:

P. Just .
Oriver's Signature
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

### > Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Owner ID: Vehicle Details

Vehicle No.

Vehicle to be Exported:

Intended Deregistration Date:

Vehicle Make: Vehicle Model:

Primary Colour Manufacturing Year:

Engine No.: Chassis No.:

Maximum Power Output:

Open Market Value:

Original Registration Date: First Registration Date:

Transfer Count:

Actual ARF Paid

Intended PARF Rebate Details

PARF Eligibility:

PARF Eligibility Expiry Date:

PARF Rebate Amount:

Intended COE Rebate Details

COE Expiry Date:

COE Category:

COE Period(Years): QP Paid:

COE Rebate Amount:

Total Rebate Amount:

The information contained herein is correct as at 06 Jan 2021

Singapore NRIC

857D

YN8028Z

No

06 Jan 2021

MITSUBISHI

CANTER FEB21ER3SDEB

White 2015

4P10B65109

FEB21EA10094

\$33,252.00 22 May 2015

22 May 2015

\$1.663.00

No

\$0.00

21 May 2025

C - Goods Vehicle & Bus

\$50,098.00 \$21,911.00

\$21,911.00

OK